

ISSUE SLIP STATEMENT

POSITION

INITIALS

ID NO.

DATE

FEE DETERMINATION

O.I.P.E. CLASSIFIER

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Carried
 + Restricted

Claim	Date	Claim	Date
Final		Final	
Original		Original	
1		53	
2		54	
3		55	
4		56	
5		57	
6		58	
7		59	
8		60	
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10		62	
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41		93	
42		94	
43		95	
44		96	
45		97	
46		98	
47		99	
48		100	

BEST AVAILABLE COPY